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Bib Data Sheet

CONFIRMATION NO. 1290

|  |   |                                  |   |   |                                |
|--|---|----------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/019,246   | <b>FILING DATE</b><br>04/03/2002<br><b>RULE</b>   | <b>CLASS</b><br>703              | <b>GROUP ART UNIT</b><br>2123   | <b>ATTORNEY DOCKET NO.</b><br>SHIG CP04MA00TA |                                |
| <b>APPLICANTS</b><br>Takayuki Okatani, Sendai-shi, JAPAN;  |   |                                  |   |   |                                |
| <b>** CONTINUING DATA *****</b><br>THIS APPLICATION IS A 371 OF PCT/JP01/03546 04/24/2001  |   |                                  |   |   |                                |
| <b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 2000-127605 04/27/2000   |   |                                  |   |   |                                |
| <b>** SMALL ENTITY **</b>  |   |                                  |   |   |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |   | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>13   | <b>TOTAL CLAIMS</b><br>4                      | <b>INDEPENDENT CLAIMS</b><br>1 |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____   |   |                                  |   |   |                                |
| <b>ADDRESS</b><br>Norman P Soloway<br>Hayes Soloway Hennessey Grossman & Hage<br>130 W Cushing Street<br>Tucson ,AZ 85701  |   |                                  |   |   |                                |
| <b>TITLE</b><br>Apparatus for constituting three-dimensional model   |   |                                  |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>575  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |